

FORM  
A 19-1A  
(Rev. 5/91)

STATE OF WASHINGTON  
INVOICE VOUCHER

AGENCY USE ONLY

AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.
2280		Jonna

AGENCY NAME

Washington Traffic Safety Commission  
1000 S Cherry St  
PO BOX 40944  
Olympia WA 98504-0944

VENDOR OR CLAIMANT (Warrant is to be payable to)

Starbuck Police Dept.  
1104 Main STR.  
Starbuck, WA. 99830

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate: I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY M.D. Jacobson  
(SIGN IN INK)  
Sergeant  
(TITLE)

5/28/08  
(DATE)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For reporting Personal Services Contract Payments to I.R.S.)				RECEIVED BY				DATE RECEIVED								
DATE	DESCRIPTION						QUANTITY	UNIT PRICE	AMOUNT	FOR AGENCY USE						
5/22/08	officer Nickerson - Nighttime Seatbelt						5.5	47.17	259.43							
5/22/08	officer Knous - "						5	51.31	256.55							
5/22/08	off. Arnold "						5	42.74	213.70							
5/28/08	off. Doane "						5.5	47.17	259.43							
5/28/08	off. Watson "						5	51.31	256.55							
5/28/08	off. Baldwin "						5	42.74	213.70							
Jonna VanDyk - Occupant Protection Program Manager										\$1459.36						
PREPARED BY Sgt. Jacobson				TELEPHONE NUMBER (509) 513-5394		DATE 7/23/08		AGENCY APPROVAL			DATE 7/23/08					
DOC. DATE		PMT DUE DATE		CURRENT DOC. NO.		REF. DOC.		VENDOR NUMBER		VENDOR MESSAGE		UBI NUMBER				
REF. DOC. SUF.	TRANS. CODE	M. O. D.	FUND	MASTER INDEX APPN. INDEX	PROGRAM INDEX	SUB. OBJ.	SUB. SUB. OBJECT	ORG. INDEX	WORKCLASS ALLOC	COUNTY BUDGET UNIT	CITY/TOWN MOS	PROJECT	SUB. PROJ.	PROJ. PHAS	AMOUNT	INVOICE NUMBER
ACCOUNTING APPROVAL FOR PAYMENT										DATE		WARRANT TOTAL		WARRANT NUMBER		